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# **POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM**

|                        |                             |
|------------------------|-----------------------------|
| Application Number     |                             |
| Filing Date            | Filed herewith              |
| First Named Inventor   | Silver                      |
| Title                  | Fast ... Pattern Inspection |
| Art Unit               | 2621                        |
| Examiner Name          | Mariam                      |
| Attorney Docket Number | C97-050_CON2                |

I hereby appoint:

☐ Practitioners at Customer Number:

OR

☒ Practitioner(s) named below:

| Name            | Registration Number |
|-----------------|---------------------|
| Russ Weinzimmer | 36,717              |
| Arthur J. O'Dea | 42,952              |
|                 |                     |
|                 |                     |

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☐ The above-mentioned Customer Number:

OR

☒ The address associated with Customer Number:

23459

OR

☐ Firm or Individual Name

Address

Address

City

State

Zip

Country

Telephone

Fax

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

## SIGNATURE of Applicant or Assignee of Record

|           |                   |           |                |
|-----------|-------------------|-----------|----------------|
| Name      | Adam Wagon        |           |                |
| Signature | <i>Adam Wagon</i> |           |                |
| Date      | 9/8/2003          | Telephone | (508) 877-1952 |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☒ \*Total of 3 forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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## **SIGNATURE of Applicant or Assignee of Record**

|           |                  |           |              |
|-----------|------------------|-----------|--------------|
| Name      | William M Silver |           |              |
| Signature | [Signature]      |           |              |
| Date      | 8 Sept 2003      | Telephone | 508-650-3231 |

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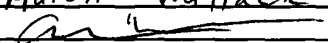
23459

OR

|  |       |     |  |
|--|-------|-----|--|
| <input type="checkbox"/> Firm or Individual Name |       |     |  |
| Address  |       |     |  |
| Address  |       |     |  |
| City   | State | Zip |  |
| Country  |       |     |  |
| Telephone  | Fax   |     |  |

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☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

|           |   |           |              |
|-----------|---|-----------|--------------|
| Name      | Aaron Wallack   |           |              |
| Signature |  |           |              |
| Date      | 9/8/2003  | Telephone | 508-650-3261 |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☒ \*Total of 3 forms are submitted.

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**DECLARATION, POWER OF ATTORNEY, AND  
PETITION FOR PATENT APPLICATION**

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|                  |  |
|------------------|--|
| Applicant:       | <b>William Silver, Aaron S. Wallack, Adam Wagman</b>               |
| Atty. Docket No. | <b>C97-050</b>   |
| Serial No.:      | <b>09/001,869</b>  |
| Filed:           | <b>December 31, 1997</b>   |
| For:             | <b>FAST HIGH-ACCURACY MULTI-DIMENSIONAL PATTERN<br/>INSPECTION</b> |

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**DECLARATION**

As a below-named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first, and sole inventor (if only one name is listed below) or, the below named inventors are the original, first and joint inventors (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**FAST HIGH-ACCURACY MULTI-DIMENSIONAL PATTERN INSPECTION**  
the specification of which (check one)

☐ is attached hereto.

☒ was filed on **December 31, 1997** as Application Serial No. **09/001,869**.

I do not know and do not believe that the subject matter of this application was ever known or used in the United States before my invention thereof or patented or described in any printed publication in any country before my invention thereof or more than one year prior to the date of this application;

that said subject matter has not been patented or made the subject of an issued inventor's certificate in any country foreign to the United States on an application filed by me or my legal representatives or assigns more than twelve months prior to the date of this application;

that I acknowledge my duty to disclose information of which I am aware which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a);

that no application for patent or inventor's certificate on the subject matter of this application has been filed by me or my representatives or assigns in any country foreign to the United States, except those identified below; and

that I have reviewed and understand the contents of the specification, including the claims as amended by any amendment referred to herein.

---

### POWER OF ATTORNEY

As a named inventor, I hereby appoint the following attorney(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

Russ Weinzimmer, Esq.      Registration No. 36,717

Send correspondence to:

Russ Weinzimmer, Esq.  
Cognex Corporation  
One Vision Drive  
Natick, MA 01760

Direct telephone calls to:

Russ Weinzimmer at 508-650-3154

Direct fax transmissions to:

508-650-3329      Attention: Russ Weinzimmer, Esq.

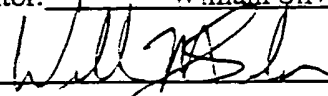
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### PETITION FOR PATENT APPLICATION

Wherefore I petition that letters patent be granted to me for the invention or discovery described and claimed in the attached specification and claims, and hereby subscribe my name to said specification and claims and to the foregoing declaration, power of attorney, and this petition.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full Name of first inventor: William Silver

Inventor's Signature: 

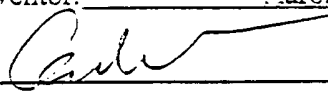
Date: 3 June 98

Residence: 25 Arrowhead Road. Weston, MA 02193

Citizenship: United States

Post Office Address (if different): \_\_\_\_\_

Full Name of second inventor: Aaron<sup>S.</sup> Wallack

Inventor's Signature: 

Date: 3 June 98

Residence: 9 Pennacook Lane Natick MA 01760

Citizenship: US

Post Office Address (if different): \_\_\_\_\_

Full Name of third inventor: Adam Wagman

Inventor's Signature: 

Date: 3 June 98

Residence: 1550 Worcester Rd #101 Framingham, MA 01702

Citizenship: USA

Post Office Address (if different): \_\_\_\_\_